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## PATENT APPLICATION FEE DETERMINATION RECORD
### Substitute for Form PTO-875

**Application or Docket Number**

### CLAIMS AS FILED – PART I

| | (Column 1) | (Column 2) | | SMALL ENTITY | | OR | OTHER THAN SMALL ENTITY | |
|---|---|---|---|---|---|---|---|---|
| FOR | NUMBER FILED | NUMBER EXTRA | | RATE | FEE | | RATE | FEE |
| BASIC FEE (37 CFR 1.16(a)) | | | | | $_____ | OR | | $_____ |
| TOTAL CLAIMS (37 CFR 1.16(c)) | minus 20 = | * | | X $_____ = | | OR | X $_____ = | |
| INDEPENDENT CLAIMS (37 CFR 1.16(b)) | minus 3 = | * | | X $_____ = | | OR | X $_____ = | |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) | | | | + $_____ = | | OR | + $_____ = | |
| * If the difference in column 1 is less than zero, enter "0" in column 2. | | | | TOTAL | | OR | TOTAL | |

### CLAIMS AS AMENDED – PART II

10/21/04

| | | (Column 1) | | (Column 2) | (Column 3) | | SMALL ENTITY | | OR | OTHER THAN SMALL ENTITY | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| **AMENDMENT A** | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE | ADDI-TIONAL FEE | | RATE | ADDI-TIONAL FEE |
| | Total (37 CFR 1.16(c)) | * 4 | Minus | ** 20 | = | | X $_____ = | | OR | X $_____ = | |
| | Independent (37 CFR 1.16(b)) | * 1 | Minus | *** 3 | = | | X $_____ = | | OR | X $_____ = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | | | + $_____ = | | OR | + $_____ = | |
| | | | | | | | TOTAL ADD'L FEE | | OR | TOTAL ADD'L FEE | |

| | | (Column 1) | | (Column 2) | (Column 3) | | RATE | ADDI-TIONAL FEE | | RATE | ADDI-TIONAL FEE |
|---|---|---|---|---|---|---|---|---|---|---|---|
| **AMENDMENT B** | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | | | | | |
| | Total (37 CFR 1.16(c)) | * | Minus | ** | = | | X $_____ = | | OR | X $_____ = | |
| | Independent (37 CFR 1.16(b)) | * | Minus | *** | = | | X $_____ = | | OR | X $_____ = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | | | + $_____ = | | OR | + $_____ = | |
| | | | | | | | TOTAL ADD'L FEE | | OR | TOTAL ADD'L FEE | |

| | | (Column 1) | | (Column 2) | (Column 3) | | RATE | ADDI-TIONAL FEE | | RATE | ADDI-TIONAL FEE |
|---|---|---|---|---|---|---|---|---|---|---|---|
| **AMENDMENT C** | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | | | | | |
| | Total (37 CFR 1.16(c)) | * | Minus | ** | = | | X $_____ = | | OR | X $_____ = | |
| | Independent (37 CFR 1.16(b)) | * | Minus | *** | = | | X $_____ = | | OR | X $_____ = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | | | + $_____ = | | OR | + $_____ = | |
| | | | | | | | TOTAL ADD'L FEE | | OR | TOTAL ADD'L FEE | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
   The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

*If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.*